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What Are the Most Effective Methods for Managing General Psychosocial Stress?

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What are the most effective methods for managing general psychosocial stress?

Evidence-Based Answer

Mindfulness-based stress reduction (MBSR), cognitive-behavioral stress reduction (CBSR), and somatic relaxation are all effective therapies for psychosocial stress. Exercise also reduces stress and improves mental health (SOR **B**, based on small randomized controlled trials [RCTs]). Anxiolytic agents and antidepressants may be used in refractory cases. (SOR **C**, expert opinion.)

An RCT compared MBSR (n=27), somatic relaxation (n=24), and no therapy (n=30) in healthcare students. MBSR consisted of meditation, body scans (participants focus attention on different body areas to notice stress and relax muscle groups), Hatha yoga, and group discussion. Somatic relaxation involved progressive muscle relaxation, breathing techniques, and guided imagery to reduce stress. The students participated in weekly 1.5-hour sessions over a month for somatic relaxation or MBSR. Distress levels were quantified using the Global Severity Index (GSI), a 53-item test that measures psychological distress, with higher scores reflecting higher overall distress. Preintervention mean GSI scores for all groups were 0.64, compared with a normative mean of 0.25, indicating significant stress at baseline. Somatic relaxation group participants reduced GSI scores by -0.39 compared with a reduction of -0.13 in the control group ($P=.01$). MBSR group scores decreased by -0.42 compared with control ($P=.002$). No statistically significant difference was found in the treatment effect between MBSR and somatic relaxation.¹

A small, nonrandomized study of 50 patients compared MBSR (n=36) with CBSR (n=14). CBSR

used relaxation exercises and cognitive-behavioral stress management skills to improve thinking. Participants paid more for the MBSR therapy, but no initial demographic or income differences were noted. The 10-item Perceived Stress Scale was used to evaluate stress levels. The MBSR group scores decreased from 19.7 to 14.8 ($P<.01$), while the CBSR group scores decreased from 18.2 to 13.3 ($P=.013$). There was no statistically significant difference between the CBSR and MBSR effect.²

Another study (n=44), examined the effectiveness of an aerobic exercise program to improve mental health. The program included behavioral modification and counseling sessions as well as aerobic and weight-training exercise. Participants were enrolled in a 24-week program (n=20) or a wait-list control group (n=24). The 42-question Depression and Stress Scale was used to measure perceived stress, with higher scores reflecting higher stress. The exercise therapy group scores declined by an average of -6.6 points, compared with the control group reduction of -2.4 points ($P=.036$).³

The Work Loss Data Institute has guidelines for the management of stress-related conditions. These guidelines were created by a comprehensive medical literature review, focusing on high-quality systematic reviews, meta-analyses, clinical trials, and preexisting guidelines. They recommend that patients be evaluated for impaired mental function, overwhelming symptoms, signs of substance abuse, or debilitating depression, and that serious conditions be ruled out before treating for generalized psychosocial stress. Initial recommended therapies include relaxation/meditation, aerobic exercise, behavioral training, and cognitive-behavioral therapy. The guidelines state that short-term anxiolytic agents and antidepressants can be used to improve function for acute stress.⁴

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